

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 512229

FILED
Mar 21, 2008
Secretary of State

Entity Name: GLUECK'S AUTO PARTS, INC.

Current Principal Place of Business:

4801 PREYMORE STREET
OSPREY, FL 342298832

New Principal Place of Business:

Current Mailing Address:

4801 PREYMORE STREET
OSPREY, FL 342298832

New Mailing Address:

FEI Number: 59-1770322

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLUECK, ALBERT JR
4801 PREYMORE STREET
OSPREY, FL 34238 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GLUECK, ALBERT JR
Address: 4801 PREYMORE STREET
City-St-Zip: OSPREY, FL 34229

Title: ST () Delete
Name: GLUECK, HELEN D
Address: 4801 PREYMORE STREET
City-St-Zip: OSPREY, FL 34229

Title: V () Delete
Name: JEFFERSON, ROBERT E.,
Address: 810 BENEVA ROAD
City-St-Zip: SARASOTA, FL 34232

Title: V () Delete
Name: GLUECK, ALBERT III
Address: 4801 PREYMORE STREET
City-St-Zip: OSPREY, FL 34229

Title: S () Delete
Name: STONE, ANGELA G
Address: 1759 VAMO DRIVE
City-St-Zip: SARASOTA, FL 34231

Title: S () Delete
Name: KAUFMAN, BRANDY G.
Address: 7015 WESTWOOD DRIVE
City-St-Zip: SARASOTA, FL 34241

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HELEN D GLUECK

ST

03/21/2008

Electronic Signature of Signing Officer or Director

_____ Date